

COMBINED DECLARATION AND POWER OF ATTORNEY

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled MESSAGE INSERTION SYSTEM AND METHOD, the specification of which:

☒ is attached hereto.

☐ was filed on _ as Application Serial No. _ and was amended on _____.

☐ was described and claimed in PCT International Application No. _____ filed on _____ and as amended under PCT Article 19 on _____.

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose all information I know to be material to patentability in accordance with Title 37, Code of Federal Regulations, §1.56.

I hereby appoint the following attorneys and/or agents to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

Lawrence K. Kolodney, Reg. No. 43,807
Timothy A. French, Reg. No. 30,175

David L. Feigenbaum, Reg. No. 30,378
John F. Hayden, Reg. No. 37,640

Address all telephone calls to LAWRENCE K. KOLODNEY at telephone number (617) 542-5070.

Address all correspondence to LAWRENCE K. KOLODNEY at:

FISH & RICHARDSON P.C.
225 Franklin Street
Boston, MA 02110-2804

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patents issued thereon.

Full Name of Inventor: JOSEPH BATES

Inventor's Signature: _____

Residence Address: _____

Citizenship: _____

Post Office Address: _____

Newton, MA

United States

19 Randlett Park

Newton, MA 02465

Date: 18 Sep 01

Combined Declaration and Power of Attorney
Page 2 of 2 Pages

Full Name of Inventor: A. BRYAN LOYALL

Inventor's Signature:

Residence Address:

Citizenship:

Post Office Address:

Cambridge, MA

United States

16A Forest Street, Apt. B1
Cambridge, MA 02140

Date:

Sept. 18, 2001

Full Name of Inventor: PAOLO M. PISELLI

Inventor's Signature:

Residence Address:

Citizenship:

Post Office Address:

Watertown, MA

United States

99 Westminister Avenue
Watertown, MA 02472

Date:

Sept. 18, 2001

Full Name of Inventor: PETER W. WEYHRAUCH

Inventor's Signature:

Residence Address:

Citizenship:

Post Office Address:

Newton, MA

United States

3 Jaffrey Circle
Newton, MA 02468

Date:

Sept 18, 2001

Full Name of Inventor: STANTON E. WOOD

Inventor's Signature:

Residence Address:

Citizenship:

Post Office Address:

Boston, MA

United States

26 Hemenway Street, #5
Boston, MA 02115

Date:

Sept 18 2001